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SEP 15 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:	Kolterman et al.	Group Art Unit: 1439
Confirmation No.:	4614	Atty Docket No: 254/057 CON
Serial No.:	10/643,681	Examiner: Bennett M. Celsa
Filed:	August 18, 2003	
For:	METHODS FOR REGULATING POSTRANDIAL BLOOD PRESSURE	

FACSIMILE TRANSMISSION COVER SHEET

Certificate of Transmission Under 37 C.F.R. 1.8

I hereby certify that the following listed correspondence in the above referenced application is being transmitted by facsimile to the Commissioner for Patents, Washington DC to telephone number (703) 872-9306 on this 15th day of September, 2004.


Amanda J. Halverson

Document	No. of Pages
Second Preliminary Amendment	13
Fee Transmittal	1 + dup

Total Number of Pages Transmitted (including this page): 14⁵

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PTO/SB/17 (10-03)

Approved for use through 07/31/2008, OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 180.00**Complete If Known**

Application Number	10/643,681
Filing Date	August 18, 2003
First Named Inventor	Kolterman et al.
Examiner Name	Bennett M. Celsa
Art Unit	4614
Attorney Docket No.	254/057 CON

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit Account Number
010535Deposit Account Name
Amylin Pharmaceuticals

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	180	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
46	20**	9	180
Independent Claims	3**		
Multiple Dependent			

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$) 180

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
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1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) -**SUBMITTED BY**

Name (Print/Type)	Mi K. Kim	Registration No. (Attorney/Agent)	44,830	Telephone	(858)5522200
Signature		Date	Sept. 15, 2004		

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																															
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<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 010535 Deposit Account Name: Amylin Pharmaceuticals		Large Entity Small Entity																																																																																																																																																																															
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Name (Print/Type)	Mi K. Kim	Registration No. (Attorney/Agent)	44,830
Signature		Telephone	(858)5522200
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Examiner : Bennett M. Celsa
Title : METHODS FOR REGULATING POSTPRANDIAL BLOOD GLUCOSE

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

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CENTRAL FAX CENTER

SEP 15 2004

SECOND PRELIMINARY AMENDMENT

Sir:

Please enter the following amendments to the claims prior to examination.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 13 of this paper.

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

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[Signature]
Aminda Halverson